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| APPLICATION NUMBER | FILING OR 37 CFR DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|-----------------------|-----------------------|------------------------|
| 10/767,088 | 01/29/2004 | Andrew T. Tomerlin | CML01079J |

Larson & Associates, P.C.
221 East Church Street
Frederick, MD 21701-5405

RECEIVED JUN 17 2004

CONFIRMATION NO. 4603

FORMALITIES LETTER



OC000000012946918

Date Mailed: 06/15/2004

NOTICE TO FILE CORRECTED APPLICATION PAPERS

Filing Date Granted

An application number and filing date have been accorded to this application. The application is informal since it does not comply with the regulations for the reason(s) indicated below. Applicant is given TWO MONTHS from the date of this Notice within which to correct the informalities indicated below. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

The required item(s) identified below must be timely submitted to avoid abandonment:

- A substitute specification in compliance with 37 CFR 1.52, 1.121(b)(3), and 1.125, is required. The specification, claims, or abstract page(s) submitted is not acceptable and cannot be scanned or properly stored because:
 - The specification, claims, or abstract page(s) 10 contain hand lettering.

Replies should be mailed to: Mail Stop Missing Parts
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*A copy of this notice **MUST** be returned with the reply.*

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PART 2 - COPY TO BE RETURNED WITH RESPONSE



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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|----|------------------------|--------------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | | Application Number | 10/767,088 |
| | | Filing Date | 01/29/2004 |
| | | First Named Inventor | Andrew T. Tomerlin |
| | | Group Art Unit | |
| | | Examiner Name | |
| Total Number of Pages in This Submission | 28 | Attorney Docket Number | CML01079J |

ENCLOSURES (check all that apply)

| | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers <i>(for an Application)</i> | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input checked="" type="checkbox"/> Replacement Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation | <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Change of Correspondence Address | 1. Replacement specification, claims, and abstract; |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Terminal Disclaimer | 2. Return receipt postcard. |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> Request for Refund | |
| <input checked="" type="checkbox"/> Response to Notice to File Corrected Application Papers | <input type="checkbox"/> CD, Number of CD(s) | |
| <input checked="" type="checkbox"/> Copy of Notice to File Corrected Application Papers | | |
| | Remarks | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Renee' Michelle Larson Larson & Associates, P.C. |
| Signature | |
| Date | July 29, 2004 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to:

Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date:

July 29, 2004

| | | | |
|----------------------|------------------------|------|---------------|
| Type or printed name | Renee' Michelle Larson | | |
| Signature | | Date | July 29, 2004 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

O I P E SC172
JUL 30 2004
PATENT & TRADEMARK OFFICE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Andrew T. Tomerlin et al
Application No.: 10/767,088
Filed: 01/29/2004
Title: CONFIGURABLE DELAY LINE
CIRCUIT
Attorney Docket No.: CML01079J

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Group Art Unit:

Examiner:

RESPONSE TO NOTICE TO FILE CORRECTED APPLICATION PAPERS

Sir:

This is in response to a Notice to File Corrected Application Papers. Enclosed is a copy of said Notice and the following documents and fees to complete the filing requirements of the above-identified application. Applicant further submits replacement sheets containing only the required formality changes; no new matter is introduced in this submission.

Executed Declaration and Power of Attorney. The above-identified application is the same application which the inventor executed by signing the enclosed declaration.

Statutory basic filing fee Utility Design

Additional claim fees of \$

A Petition for Extension of Time for reply to Notice of Missing Parts is attached.

one month = \$110.00

two months = \$420.00

three months = \$950.00

four months = \$1,480.00

Replacement specification, claims and abstract

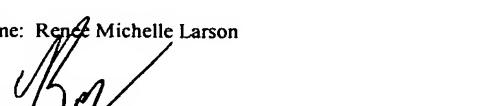
Replacement drawings

Please charge any fees necessary for prosecution of the present application to Applicant's Deposit Account No. 50-0375. If any extension of time is required, such extension of time is hereby requested. Please charge any additional required fee for extension of time to Applicant's Deposit Account No. 50-0375.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date of Deposit: July 29, 2004

Typed Name: Renee Michelle Larson

Signature: 

Respectfully submitted,


Renee Michelle Larson
Attorney/Agent for Applicant(s)
Reg. No. 36193
Date: July 29, 2004
Telephone No.: 301-668-3073